Fill in this information to identify your case:						
Debtor 1	Dalton Clinton Midd	leton				
Debtor 2 (Spouse, if filing)	Melissa Beck Middle	eton				
United States Bankruptcy Court for the: Northern District of Mississippi						
Case number (if known)	17-13779					

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,166.45 4,117.78 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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	14.22
8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you  S  O.00  For your spouse  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  14. You are married and your spouse is not filling with you.  15. Total average monthly income from line 11.  16. Calculate the marital adjustment. Check one:  17. You are married and your spouse is filling with you.  18. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	14.22
8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you	14.22
For you \$ 0.00 For your spouse \$ 0.00  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  14. You are married and your spouse is filling with you. Fill in 0 below.  15. You are married and your spouse is filling with you. Fill lin the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustment does not apply, enter 0 below.  15. If the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  16. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  17. If the amount of the income is the spouse's tax liability or the spouse's support of someone other than you or your dependents.	14.22
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$	14.22
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$	14.22
benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount.  Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$ 0.00  Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  \$ 3,166.45 + \$ 4,117.78 = \$ 7,2i	14.22
Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$ 0.00  Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  21. Copy your total average monthly income from line 11.  22. Copy your total average monthly income from line 11.  3. Calculate the marital adjustment. Check one:  3. You are not married. Fill in 0 below.  4. You are married and your spouse is filling with you. Fill in 0 below.  5. John School S	14.22
Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	M 22
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  \$ 3,166.45	M 22
each column. Then add the total for Column A to the total for Column B.    Salidade   Sa	14 22
Determine How to Measure Your Deductions from Income  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	4.23
You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	34.23
You are married and your spouse is not filling with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	
dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	
adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	
If this adjustment does not apply, enter 0 below.	
\$	
Total\$Copy here=>	0.00
14. Your current monthly income. Subtract line 13 from line 12. \$	34.23
15. Calculate your current monthly income for the year. Follow these steps:	
15a. Copy line 14 here=> \$	
Multiply line 15a by 12 (the number of months in a year).	34.23
15b. The result is your current monthly income for the year for this part of the form	34.23 ———

**Dalton Clinton Middleton** 

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**Melissa Beck Middleton** 17-13779 Case number (if known) Debtor 2 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. MS 16b. Fill in the number of people in your household. 4 61,182.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 17a. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. \$ 7,284.23 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 7,284.23 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 7,284.23 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 87.410.76 20b. The result is your current monthly income for the year for this part of the form \$ 61,182.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Dalton Clinton Middleton X /s/ Melissa Beck Middleton **Melissa Beck Middleton Dalton Clinton Middleton** Signature of Debtor 1 Signature of Debtor 2 Date October 20, 2017 Date October 20, 2017 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

**Dalton Clinton Middleton** 

Debtor 1

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Mississippi
☐ Check if this is an amended filing

### Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

**Calculate Your Deductions from Your Income** 

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,650.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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**Dalton Clinton Middleton** Debtor 1 **Melissa Beck Middleton** 17-13779 Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. 196.00 Copy here=> \$ 196.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 7g. Total. Add line 7c and line 7f 196.00 Copy total here=> 196.00 Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 631.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 952.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Bancorp South** 116.00 \$ **Bancorp South Bank** 777.00 Copy Repeat this amount 893.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Сору Subtract line 9b (total average monthly payment) from line 9a (mortgage 59.00 59.00 \$ here=> or rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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ebtor 1 ebtor 2	Melissa Beck Middleton		Case number (if known)	17-13779	
11.	Local transportation expenses: Check the number of vehi	cles for which you claim	an ownership or ope	erating expense.	
	☐ 0. Go to line 14.				
	☐ 1. Go to line 12.				
	■ 2 or more. Go to line 12.				
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for				430.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.				
Ve	hicle 1 Describe Vehicle 1: 2016 Hyundai Santa Fe Ave., Tupelo MS 38801		ion: 2512 Hood		
13a.	Ownership or leasing costs using IRS Local Standard		\$ 485	.00	
13b.	Average monthly payment for all debts secured by Vehicle 1				
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		at		
	Name of each creditor for Vehicle 1	Average monthly payment			
	Ally Financial	\$ 643.02			
	Total Average Monthly Payment	\$643.02	Copy here => -\$	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0	), enter \$0		Vehicle 1 expense here => \$ _	0.00
Ve	Describe Vehicle 2: 2014 Honda Accord Hy Ave., Tupelo MS 38801		ocation: 2512 Hoo	d	
13d.	Ownership or leasing costs using IRS Local Standard		\$ 485	.00	
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
	American Honda Finance	\$ 403.69			
	Total average monthly payment	\$403.69	Copy here => -\$	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	), enter \$0	\$ 81.	Copy net Vehicle 2 expense here	81.31
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of		RS Local Standards		0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in v not claim more than the IRS Local Standard for <i>Public Trans</i>	1 or more vehicles in lin what you believe is the a	e 11 and if you claim		0.00

**Dalton Clinton Middleton** 

Debtor 1

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Debtor 1 Debtor 2 Dalton Clinton Middleton
Melissa Beck Middleton
Case number (if known)
17-13779

Oth	er Nece		In addition to the expense the following IRS categori		ons listed above	, you are allowed your monthly expense	s for	
16.	6. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.							1,400.00
		•					\$	
17.		ntary deductions: Toutions, union dues, a		eductions	s that your job re	quires, such as retirement		
				job, such	n as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	B. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						\$	70.00
19.	<ol> <li>Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.</li> </ol>							0.00
			-			You will list these obligations in line 35.	\$	
20.			nly amount that you pay fo	r educati	on that is either i	required:		
		a condition for your jo					•	0.00
	■ for	your physically or me	ntally challenged depende	ent child	if no public educ	ation is available for similar services.	\$	0.00
21.			ly amount that you pay for r any elementary or secon			sitting, daycare, nursery, and preschool.	\$	0.00
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.							0.00
	Payme	ents for health insurar	nce or health savings acco	unts sho	ould be listed only	y in line 25.	\$	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						+\$	0.00
24.			lowed under the IRS exp	oense al	lowances.		\$	4,517.31
A -1 -1		nes 6 through 23.	• There are additional	المام عاد مدا		Managa Tant		
Add	itionai	Expense Deduction	S These are additional Note: Do not include					
25.	insurar					<b>ises.</b> The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health	insurance		\$	936.32			
	Disabil	lity insurance		\$	2.29			
	Health	savings account		+ \$	0.00	_		
	Total			\$_	938.61	Copy total here=>	\$	938.61
	Do you	actually spend this t No. How much do y						
		Yes		\$_				
26.	continu	ue to pay for the reas ousehold or member	onable and necessary car	e and su vho is ur	pport of an elder able to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
	-	· ·	the nature of these exper				\$	0.00

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Debtor 1 Debtor 2	Dalton Clinton Middleton Melissa Beck Middleton	Case number (if known)	17-13779		
28.	<b>Additional home energy costs.</b> Your hom line 8.	e energy costs are included in your insurance and operating e	expenses on		
	If you believe that you have home energy co 8, then fill in the excess amount of home en	osts that are more than the home energy costs included in expergy costs	oenses on line	<b>3</b>	
	You must give your case trustee documents amount claimed is reasonable and necessar	ation of your actual expenses, and you must show that the addry.	ditional	\$	0.00
		ren who are younger than 18. The monthly expenses (not me pendent children who are younger than 18 years old to attend			
	You must give your case trustee documents claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain why the a ot already accounted for in lines 6-23.	imount		
	* Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after the date of ac	djustment.	\$	0.00
		ne monthly amount by which your actual food and clothing expallowances in the IRS National Standards. That amount cannot in the IRS National Standards.			
		onal allowance, go online using the link specified in the separ o be available at the bankruptcy clerk's office.	ate		
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the form of cash nization. 11 U.S.C. § 548(d)(3) and (4).	n or financial		
	Do not include any amount more than 15% $$	of your gross monthly income.		\$_	50.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.		\$	988.61
Ded	uctions for Debt Payment				
	For debts that are secured by an interest i oans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehi	icle		
	To calculate the total average monthly paymereditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each secure nkruptcy. Then divide by 60.	d		
	Mortgages on your home			Averag paymei	e monthly nt
33a.	Copy line 9b here		=>	\$	893.00
	Loans on your first two vehicles				
33b.	Copy line 13b here		=>	\$	643.02
33c.				\$	403.69
				Ψ	403.09
33d. Nam	List other secured debts:  e of each creditor for other secured debt	inclu	s payment ide taxes surance?		
			No		
	-NONE-		Yes	œ.	
				\$	
			No Yes	\$	
				Φ	
			No		
			Yes +	\$	
			Com	,	
33e	Total average monthly payment. Add lines	33a through 33d\$\$	9.71 Copy total here:	_	1,939.71

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**Dalton Clinton Middleton** Debtor 1 **Melissa Beck Middleton** 17-13779 Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Name of the creditor Total cure amount Monthly cure amount  $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. ■ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 7,247.00 ÷ 60 120.78 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> \$ 2,060.49 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,517.31 expense allowances Copy line 32, All of the additional expense deductions 988.61 Copy line 37, All of the deductions for debt payment 2,060.49 7,566.41 7,566.41 Copy total here=> Total deductions.....

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ebtor 2	Melissa B		Middleto liddleto					-	Case	numbe	r ( <i>if known</i> )	17-1	3779	
art 2:	Determin	e Your	Disposa	ble Income U	Inder 11 U.S	.C. § 132	25(b	o)(2)						
								C-1, Chapter 13 mmitment Peri					\$	7,284.23
<b>chi</b> disa rec	ildren. The nability payme ceived in according	nonthly ents for ordance	average a depende with app	of any child so dent child, rep blicable nonba	upport payme orted in Part	ents, fost I of Form	er o	or dependent care payments, of 2C-1, that you at reasonably	or	\$		0.0	0	
em in 1	necessary to be expended for such child.  41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as speci in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, a specified in 11 U.S.C. § 362(b)(19).				plans, as specif		\$_		0.0	0				
42. <b>Tot</b>	tal of all ded	luction	s allowe	d under 11 U.	S.C. § 707(b	)(2)(A).	Сор	y line 38 here	=>	\$	7,	566.4	1	
exp the	penses and yeir expenses.	ou hav	ve no reas lust give y		ative, describ tee a detailed	e the sp	ecia	y additional al circumstances n of the special	and					
Descri	be the spec	ial circ	umstand	es				Amount of ex	cpen	ise				
							_	\$						
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						Total	\$_	0.0	0	Copy	_		0.00	
						'				1	7 EGG A	ای	Сору	7,566.41
44. <b>To</b> t	tal adjustme	ents. A	dd lines 4	0 through 43.				=>	\$		7,566.4	-   h	ere=> <b>-</b> \$	7,300.41
								=> btract line 44 fro	\$ m lin	 ne 39.		<u> </u>	\$	-282.18
45. <b>Ca</b> l		montl	hly dispo	sable income					m lin	 ne 39.		n		•
45. Cal art 3: 46. Che hav time you	Change in incover changed of the your case of the your part of the your pa	n Income or or are will be etition,	me or Ex expense rirtually ce open, fill check 12	sable income penses es. If the inconstrain to change in the informate 2C-1 in the fir	e under § 13: ne in Form 12 ge after the da ion below. Fo st column, er	25(b)(2).  22C-1 or ate you for example ter line 2	Sul the iled ole, i		epor peti ortec mn,	ted in	this form	the r		•
45. Cal	Change in incover changed of the your case of the your part of the your pa	n Income or or are will be etition,	me or Ex rexpense rirtually ce open, fill check 12 n when the	sable income penses es. If the inconstrain to change in the informate 2C-1 in the fir	e under § 13: ne in Form 12 ge after the da ion below. Fo st column, er	25(b)(2).  22C-1 or ate you for example ter line 2	Sul the iled ole, i	expenses you r your bankruptcy if the wages rep the second colu	epor peti ortec mn, se.	ted in ition a d incre expla	this form	the r		-282.18
45. Cal  1rt 3:  46. Char  1mt you  1mt	Change in incover changed of the your case of the your pages increased Line	n Income or or are will be etition,	me or Ex rexpense rirtually ce open, fill check 12 n when the	penses  s. If the income ratain to change the informat 2C-1 in the fire e increase occ	e under § 13: ne in Form 12 ge after the da ion below. Fo st column, er	25(b)(2).  22C-1 or ate you for example ter line 2	Sul the iled ole, i	expenses you r your bankruptcy if the wages rep the second colu unt of the increa	epor peti ortec mn, se.	ted in ition a d incre expla	this form and during eased afte in why the ncrease or lecrease?	the r	\$	-282.18
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Debtor 1 Debtor 2	Dalton Clinton Middleton Melissa Beck Middleton	Case number (if known)	17-13779

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Dalton Clinton Middleton
Dalton Clinton Middleton
Signature of Debtor 1

Date October 20, 2017
MM / DD / YYYYY

Sign Below

X /s/ Melissa Beck Middleton
Signature of Debtor 2

Date October 20, 2017
MM / DD / YYYYY

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Debtor 1 Debtor 2 Dalton Clinton Middleton Melissa Beck Middleton

Case number (if known) 17-13779

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period **04/01/2017** to **09/30/2017**.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Middleton & Tinsley Law Firm, PLLC

Income by Month:

6 Months Ago:	04/2017	\$4,000.00
5 Months Ago:	05/2017	\$3,311.69
4 Months Ago:	06/2017	\$4,767.72
3 Months Ago:	07/2017	\$3,000.00
2 Months Ago:	08/2017	\$1,919.26
Last Month:	09/2017	\$2,000.00
	Average per month:	\$3,166.45

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Debtor 1 Debtor 2 Dalton Clinton Middleton Melissa Beck Middleton

Case number (if known)

17-13779

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 04/01/2017 to 09/30/2017.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: BancorpSouth

Income by Month:

6 Months Ago:	04/2017	\$4,117.78
5 Months Ago:	05/2017	\$4,117.78
4 Months Ago:	06/2017	\$4,117.78
3 Months Ago:	07/2017	\$4,117.78
2 Months Ago:	08/2017	\$4,117.78
Last Month:	09/2017	\$4,117.78
	Average per month:	\$4,117.78